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APPLICANTS
 Roger P. Jackson, Mission Hills, KS;

** CONTINUING DATA *****
none CCS

** FOREIGN APPLICATIONS *****
none CCS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 10/16/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KS	SHEETS DRAWING 2	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>CCS</i>		

Verified and Acknowledged

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TITLE
 Threadform for medical implant closure

FILING FEE RECEIVED 1022	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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